



Infinity Claims Management

QUESTIONNAIRE

NAME	
ADDRESS	
YOUR DATE OF BIRTH	
OCCUPATION (At time of advice)	
SPOUSE / PARTNERS NAME	
SPOUSE/PARTNERS DATE OF BIRTH	
ADVISORS NAME AND ADDRESS	
DID YOU MEET YOUR ADVISOR?	
DID YOU COMPLETE AN ADVISORS QUESTIONNAIRE?	
DID YOU RECEIVE A SUITABILITY LETTER?	
HAS THE INVESTMENT BEEN	

Infinity Claims Management Limited is authorised and regulated by the Financial Conduct Authority under temporary permission 830862



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CHANGED FROM WHAT WAS RECOMMENDED? (SIPP/INVESTMENT ONLY)	
HOW WAS YOUR HEALTH AND THAT OF YOUR SPOUSE/PARTNER AT TIME OF ADVICE – full details please	
HAVE YOU HAD ANY SIGNIFICANT HEALTH ISSUES IN THE PAST?	
ARE YOU A SMOKER?	
DO YOU HAVE ANY PENSIONS? – Please give full details	
PLEASE COMPLETE THE ATTITUDE TO RISK TABLE BELOW	FOR SIPP/INVESTMENT CLAIMS ONLY

Infinity Claims Management Ltd is regulated by the Claims Management Regulator in respect of regulated claims management activities (CRM 43967); its registration is recorded on the website www.gov.uk/moj/cmr.

Registered in England and Wales. Company No 11374412 Registered address: 4 Barn Meadow, Winnington, Northwich. CW8 4XD
Tel: 0845 860 9656



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ATTITUDE TO RISK

In order to assess your attitude to risk we require the following questions completed

Risk Profile Questionnaire

		Tick
1	For how long do you wish to save/invest?	
	Less than 5 years	50
	5 – 10 years	75
	More than 10 years	100
2	Do you have an emergency fund for unexpected expenses (minimum 3 or 6 months income)	
	No	0
	Yes	100
	Yes – but it is inadequate	50
3	Do you expect your existing level of income/earnings over the investment period stated in question 1 above to . . .	
	Decrease	80
	Keep pace with inflation	140
	Outpace inflation	200
	Fluctuate	40
	Income planning is being conducted as part of this review / don't	100
4	Which best describes your overall view on investing	
	I want to achieve higher returns and am prepared to accept some degree of volatility	220
	I want stable returns without volatility	100
	I want to achieve higher returns with a reasonable level of security	150
	I want to maximise my returns and am not concerned about market volatility	380
5	In order to achieve real investment returns over the medium to long term one has to accept there will be an element of volatility and potential losses incurred at certain times through the term of investment. To what extent do you agree or disagree with this statement?	
	Strongly agree	400
	Agree	340
	Neutral	220
	Disagree	100
	Strongly disagree	60

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6	Following on from Q5, although it isn't possible to guarantee some investments will not fall by a given amount, at what level of loss within a twelve-month period would begin to cause you concern?		
	The value should not fall below the initial investment value at anytime		120
	Up to a 5% decrease in value		280
	Up to a 10% decrease in value		440
	Up to a 15% decrease in value		600
	Up to a 25% decrease in value		800
7	Are you willing to experience a higher degree of volatility in order to potentially outperform inflation?		
	Strongly agree		600
	Agree		450

	Neutral		330
	Disagree		150
	Strongly disagree		90
8	If returns could potentially be improved would you be willing to take. ...		
	A lot more risk with all of your money		200
	A lot more risk with some of your money		170
	A little more risk with all of your money		150
	A little more risk with some of your money		130
	Be unlikely to take much more risk		100
9	The proposed investment represents (this includes un-mortgaged investment property but not principle residence)		
	Less than 25% of your total portfolio of investments		380
	20 – 50% of your total portfolio of investments		300
	50 – 75% of your total portfolio of investments		220
	75% + of your total portfolio of investments		140
	I wish to invest regular premiums		280
	TOTAL		

Please Circle the total from above, in the table below:

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1059 – 1330	1
1331 – 1603	2
1604 – 1704	3
1705 – 1858	4
1859 – 2012	5
2013 – 2150	6
2151 – 2286	7
2287 – 2422	8
2423 – 2695	9
2696 – 2968	10
2969 – 3400	n/a

I confirm that this is a true reflection of my circumstances.

Clients Name: _____

Clients Signature: _____ Date: _____

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